

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000009497

**FILED**  
**Jan 21, 2012**  
**Secretary of State**

**Entity Name:** SOUTH FORT MYERS HIGH SCHOOL BAND BOOSTER CLUB, INC.

**Current Principal Place of Business:**

14020 PLANTATION RD  
ATTN: BAND DEPARTMENT  
FORT MYERS, FL 33912

**New Principal Place of Business:**

**Current Mailing Address:**

14020 PLANTATION RD  
ATTN: BAND DEPARTMENT  
FORT MYERS, FL 33912

**New Mailing Address:**

14020 PLANTATION RD  
ATTN: BAND DEPARTMENT  
FORT MYERS, FL 33912

**FEI Number:** 11-3757536

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

EISENBERG, RONALD A  
3451 BONITA BAY BLVD  
STE 206  
BONITA SPRINGS, FL 34134 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BERNER, MARY L  
Address: 15641 JOHN MORRIS RD  
City-St-Zip: FORT MYERS, FL 33908

Title: VP  
Name: GALL, CHRISTINA  
Address: 6524 GARLAND STREET  
City-St-Zip: FORT MYERS, FL 33966

Title: T  
Name: HINTON, LESLIE  
Address: 10075 LONE CYPRESS ST  
City-St-Zip: FORT MYERS, FL 33966

Title: S  
Name: QUINONES, ADRIAN  
Address: 8313 BERNWOOD COVE LOOP  
City-St-Zip: FORT MYERS, FL 33966

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARY L BERNER

P

01/21/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date